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STATEWIDE COVERAGE OF VERY LOW BIRTHWEIGHT INFANTS AND TEENAGE MOTHERS (LESS THAN 15 YEARS OF AGE) IN NORTH CAROLINA'S CHILD SERVICE COORDINATION PROGRAM: 1991 AND 1993

by

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ABSTRACT

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This study compares the 1991 and 1993 coverage or enrollment rates for very low birth weight (VLBW) infants and teenage mothers (less than 15 yrs.) in North Carolina's Child Service Coordination (CSC) Program, for the state as a whole and for each of the state's six perinatal care regions. The study population included NC state resident births for 1991 and 1993 who were referred to the CSC Program. For both study years, VLBW infants and mothers under 15 years enrolled in CSC, were matched to the live birth files.

The number of matched participants was expressed as a percent of the total number with the corresponding risk condition in the birth population. Coverage was also classified by whether a mother received prenatal care in a health department. It was assumed that coverage rates for both risk groups would be higher in 1993 than in 1991, and that coverage would be higher among recipients of care from local health departments.

Among VLBW infants who survived the first year of life, 79.1 percent were enrolled in the CSC Program in 1991; and in 1993, the VLBW enrollment rate dropped to 74.1 percent. For mothers under 15 years, the 1991 total coverage rate was 64.3 percent in 1991 and 70.4 percent in 1993. Statewide, health department coverage of VLBW infants and teen mothers was higher than that of private providers or those who had no prenatal care for both study years. Regional differences indicated that program coverage was generally higher for VLBW infants and mothers under 15 who received prenatal care from health departments, but not in all instances.

Coverage rates were significantly higher among health department patients for both risk groups in both study years. The overall decrease in the 1993 CSC coverage of VLBW infants was due to a significant reduction in the percentage of VLBW infants enrolled from non-health departments compared to the corresponding percentage enrolled in 1991. The overall increase in the 1993 CSC coverage of mothers under 15 was due to a significantly higher proportion enrolled from non-health departments, compared to the corresponding rate for 1991.

These findings, particularly at the regional level, provide a preliminary measure for evaluating the identification and referral process of the CSC Program.

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